
SPECIAL POS/PDI REQUEST GUIDELINES

1. Field Sales will not alter existing pieces of POS/PDI in any manner. This includes cutting or reducing in size and taping or connecting two pieces in a side by side manner.

Example: Two Posters taped together side by side with no separation requires a larger warning statement. Such an application requires at least 1/4" of separation between items.
2. Field Sales will not contract with local printers/suppliers to produce custom pieces of POS/PDI without prior approval from Winston-Salem.
3. Field Sales will not provide retail accounts and chain headquarters locations any existing piece of POS/PDI for the purpose of duplication or modification.
4. Retail Accounts/Chains can produce their own cigarette promotional POS/PDI without RJR assistance or guidance in any manner. If assistance is requested, you must adhere to the guidelines outlined in this document.
5. All special requests for POS/PDI must be made in writing to Winston-Salem using the special POS/PDI Form.
6. Special POS/PDI Request Forms should be sent to your AMO in Winston-Salem.
7. RJR prefers to produce all special requests using established printers/suppliers who are familiar with all legal requirements.
8. In special situations, Winston-Salem will provide finished art to be used by chain suppliers to produce custom POS/PDI.
9. RJR will not provide component art to be used by chain suppliers as they see fit; i.e., Camel Bent Logo or Beast Only.
10. All finished art provided to chain suppliers must be used exactly for the specific item the art was designed for. Under no circumstances, should finished art be resized or modified.
11. Special Requests for POS/PDI will only be prepared using the Brands National PDI look.
12. All telephone inquiries regarding special POS/PDI should be made to your AMO. There should not be any direct contact with Marketing, Purchasing or other Departments in Winston-Salem, unless directed.
13. All Special Requests must have a lead-time of six to eight weeks.

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**SAMPLE LETTER THAT WILL
ACCOMPANY ALL ART SENT
TO FIELD SALES**

DATE: _____

TO: _____

The enclosed mechanical artwork complies with the legal requirement for the correct Surgeon General's Warning Statement and "tar" and nicotine copy required for the Temporary or Permanent POS item described.

Under no circumstances are you to resize, alter any copy or graphic elements (except in "price" area), change colors, or omit copy without prior approval from R.J. Reynolds Tobacco Company.

The Surgeon General's Warning Statement is a live digital art file and does print as included in the mechanical file. The area inside the Surgeon General's Warning ruled box must remain white, with rule and type printing black. It cannot be altered, recreated, resized or moved from the position in which it appears. The dashed line outside the ruled Surgeon General's Warning Statement does not print, but represents the dead area in which color, but no graphic or copy may appear.

The "tar" and nicotine copy, if supplied, cannot be altered, produced in a substitute font, resized or moved from the position in which it appears.

If this mechanical contains an 1/4" advertising break line, which is included to separate "advertising areas" from "non-advertising" areas, this advertising break line does print and cannot be reduced, enlarged, deleted or moved from the position in which it appears.

If you have any questions, please contact (Agency Contact - Telephone Number).

Enclosed please find the following materials:

1. _____
2. _____
3. _____
4. _____

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SPECIAL POS / PDI REQUEST FORM

FSC168B.XLS

Date: _____

Requesting RJR Manager: _____

Region #: _____

Voice Mail #: _____

Store / Chain Name: _____

Stores: _____

After approval by Region Sales Manager
e-mail, or fax form to your Area Manager of
Operations.
Allow a minimum of 6 - 8 weeks for
special requests.

RSM Approval _____

AMO Approval _____

Requesting: (X one)

Produced POS / PDI: ☐

Is this an existing item ?

yes / no ☐

or a new item ?

yes / no ☐

or

Digital Art Mechanical Only: ☐

Due Date Required: _____

Description Of Request: _____

Please give as much detail
as possible. _____

Drawing of Request: _____

(Attach separate drawing
if necessary and sample
if available)

Exact Size: _____

"(H)"

"(W)"

Quantity Requested: _____

Size excluding dead areas: _____

"(H)"

"(W)"

Identify dead areas: (hidden by frames, etc.)

Top: " "

Bottom: " "

Sides: " "

Sku Pack: _____

Ship To Location: _____

Name: _____

(If this request is to be
warehoused by RJR,
please write RJR in
name area)

Address: _____

City, State: _____

Zip: _____

Attention: _____

Complete the below information only if art is being requested for local production

Store / Chain Contact: _____

Name: _____

Telephone: _____

Printer / Supplier Contact: _____

Name: _____

Telephone: _____

To be completed by W/S

Date request received: _____

Requisition date: _____

Item # assigned: _____

Sku pack: _____

Warehouse: _____

P.O. # assigned: _____

Supplier assigned: _____

Due date in warehouse: _____

Project cost: _____

Estimated Cost: _____

Actual Cost: _____

G/L code assigned: _____

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